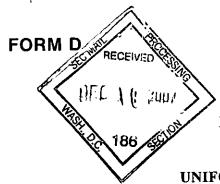
1421138



UNITED STATES
SECURITIES AND EXCHANGE COMMISSION
Washington, D.C. 20549

FORM D

NOTICE OF SALE OF SECURITIES
PURSUANT TO REGULATION D,
SECTION 4(6), AND/OR
UNIFORM LIMITED OFFERING EXEMPTION

| OMB APPRO | DVAL |
|---------------------------------|-----------|
| OMB Number: | 3235-0076 |
| Expires: April Estimated averag | 30,2008 |
| Estimated averag | e burden |
| hours per respons | se16.00 |

| \$E(| USE ON | NLY_ |
|--------|------------|--------|
| Prefix | | Serial |
| | | |
| DA | TE RECEIVI | ED |
| | l 1 | |

| Name of Offering (check if this is an amendment and name has changed, and indicate change.) | |
|---|---|
| \$3,350,000.00 Senior Secured Rural America Bond Filing Under (Check box(es) that apply): Rule 504 Rule 505 Rule 506 Section 4(6) Type of Filing: New Filing Amendment | □ ULOE PROCESSEL |
| A. BASIC IDENTIFICATION DATA | DEC 1 4 2007 |
| 1. Enter the information requested about the issuer | THOMSON — |
| Name of Issuer (check if this is an amendment and name has changed, and indicate change.) WACO PROPERTIES, INC. | FINANCIAL |
| Address of Executive Offices (Number and Street, City, State, Zip Code) | Telephone Number (Including Area Code) |
| 569 Edgewood Avenue South, Jacksonville, Florida 32205 | |
| Address of Principal Business Operations (Number and Street, City, State, Zip Code) (if different from Executive Offices) | Telephone Number (Including Area Code) |
| Brief Description of Business | |
| real estate leasing | |
| Type of Business Organization corporation limited partnership, already formed business trust limited partnership, to be formed Month Year | 07085895 |
| Actual or Estimated Date of Incorporation or Organization: 12 97 Actual Estim Jurisdiction of Incorporation or Organization: (Enter two-letter U.S. Postal Service abbreviation for State: CN for Canada; FN for other foreign jurisdiction) | |
| GENERAL INSTRUCTIONS | |
| Federal: Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D o 77d(6). | |
| When To File: A notice must be filed no later than 15 days after the first sale of securities in the offering, and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given be which it is due, on the date it was mailed by United States registered or certified mail to that address. | A notice is deemed filed with the U.S. Securities slow or, if received at that address after the date or |
| Where To File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 205 | 549. |
| Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually photocopies of the manually signed copy or bear typed or printed signatures. | y signed. Any copies not manually signed must be |
| Information Required: A new filing must contain all information requested. Amendments need only report thereto, the information requested in Part C, and any material changes from the information previously supple not be filed with the SEC. | rt the name of the issuer and offering, any changes ied in Parts A and B. Part E and the Appendix need |
| Filing Fee: There is no federal filing fee. | |
| State: This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for state ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Sare to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for accompany this form. This notice shall be filed in the appropriate states in accordance with state law, this notice and must be completed. | the exemption, a fee in the proper amount shall |

Failure to file notice in the appropriate states will not result in a loss of the tederal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predictated on the

filing of a tederal notice.

A. BASIC IDENTIFICATION DATA Enter the information requested for the following: Each promoter of the issuer, if the issuer has been organized within the past five years; Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issuer. Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and Each general and managing partner of partnership issuers. General and/or Executive Officer Director ☐ Beneficial Owner Check Box(es) that Apply: Promoter Managing Partner Full Name (Last name first, if individual) SOLE SHAREHOLDER N.G. Wade Investment Company Business or Residence Address (Number and Street, City, State, Zip Code) 569 Edgewood Avenue South, Jacksonville Florida 32205 General and/or Check Box(es) that Apply: Promoter ☐ Beneficial Owner Executive Officer Director Managing Partner Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) ☐ Beneficial Owner ☐ Executive Officer ☐ Director General and/or Check Box(es) that Apply: | Promoter Managing Partner Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) General and/or Promoter ☐ Beneficial Owner ☐ Executive Officer ☐ Director Check Box(es) that Apply: Managing Partner Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) General and/or Executive Officer Director Check Box(es) that Apply: Promoter Beneficial Owner Managing Partner Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) Executive Officer Director General and/or Check Box(es) that Apply: Promoter Beneficial Owner Managing Partner Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) General and/or Beneficial Owner Executive Officer Director Check Box(es) that Apply: Promoter Managing Partner Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code)

| | | | ··-······· | | В. П | NFORMAT | ION ABOU | T OFFERI | NG | | | | |
|---|---|----------------------|------------------------|----------------------|----------------------|----------------------|----------------------|----------------------|----------------------|---------------------------------------|----------------------|----------------------|----------------------|
| _ | Ungtha | iconer col | d, or do e s ti | ha icanar i | stand to ca | II to non-a | coredited i | nvectore in | this offer | ing? | | Yes | No ⊠ |
| 1. | rias uic | 122061 2016 | u, or does t | | | | | | | | | L | |
| 2. | Answer also in Appendix, Column 2, if filing under ULOE. What is the minimum investment that will be accepted from any individual? | | | | | | | | | | s 100 | 00.000,0 | |
| | | | | | | | | | | Yes | No | | |
| 3. | Does th | e offering | permit join | t ownershi | p of a sing | le unit? | | | | | | | X |
| 4. Enter the information requested for each person who has been or will be paid or given, directly or indirectly, any commission or similar remuneration for solicitation of purchasers in connection with sales of securities in the offering. If a person to be listed is an associated person or agent of a broker or dealer registered with the SEC and/or with a state or states, list the name of the broker or dealer. If more than five (5) persons to be listed are associated persons of such a broker or dealer, you may set forth the information for that broker or dealer only. | | | | | | | | | | | | | |
| Ful | l Name (| Last name | first, if ind | ividual) | | | | | | | | | |
| Bus | siness or | Residence | Address (N | lumber and | Street, Ci | ty, State, Z | ip Code) | | | | | <u> </u> | |
| Nar | me of Ass | ociated B | roker or De | aler | | <u> </u> | | | | | | | |
| Stat | tes in Wh | ich Person | Listed Ha | s Solicited | or Intends | to Solicit | Purchasers | | | | | | |
| | | | s" or check | | | | | | | | | □ AI | l States |
| | | | | | | | | [DE] | [DC] | FL | GA | HI] | [ID] |
| | IL MT RI | AK IN NE SC | IA NV SD | KS NH TN | CA KY NJ TX | LA NM UT | CT ME NY VT | MD NC VA | MA ND WA | MI OH WV | MN OK WI | MS OR WY | MO PA PR |
| Ful | l Name (| Last name | first, if ind | ividual) | | | | | | | | | |
| Bus | siness or | Residence | Address (1 | Number an | d Street, C | ity, State, 2 | Zip Code) | ···· ·· | | | <u>-</u> | | |
| Nar | me of Ass | sociated B | roker or De | aler | | | - | | | - | | | |
| Sta | | | Listed Ha | | | | | | | | | | |
| | (Check | "All State: | s" or check | individual | States) | ************* | | | ., | | | All States | |
| | AL IL MT RI | AK IN NE SC | AZ IA NV SD | AR KS NH TN | CA KY NJ TX | LA NM UT | ME NY VT | DE MD NC VA | DC MA ND WA | FL MI OH WV | GA MN OK WI | MS OR WY | MO PA PR |
| Ful | l Name (| Last name | first, if ind | ividual) | <u> </u> | | | | | | | | |
| Bus | siness or | Residence | Address (1 | Number an | d Street, C | ity, State, 2 | Zip Code) | | | ···· | | | |
| Nar | me of As | sociated B | roker or De | aler | | | - | | | | | | |
| Stat | tes in Wh | ich Persor | Listed Ha | s Solicited | or Intends | to Solicit | Purchasers | - | _, | · · · · · · · · · · · · · · · · · · · | | | |
| | - | | s" or check | | | | | | | | | ☐ Al | l States |
| | AL IL MT | AK IN NE SC | AZ IA NV SD | AR KS NH TN | CA KY NJ TX | CO LA NM UT | CT ME NY VT | DE MD NC VA | DC MA ND WA | FL MI OH WV | GA MN OK WI | HI MS OR WY | ID MO PA PR |

(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

| 1. | Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if the answer is "none" or "zero." If the transaction is an exchange offering, check this box \(\square\) and indicate in the columns below the amounts of the securities offered for exchange and | | |
|----|--|-----------------------------|--------------------------------------|
| | already exchanged. Type of Security | Aggregate Offering Price | Amount Already Sold |
| | •• | - | s 3,350,000.00 |
| | Debt | 3,350,000.00 | \$_3,330,000.00 |
| | Equity | § | \$ |
| | Common Preferred | | |
| | Convertible Securities (including warrants) | 5 | \$ |
| | Partnership Interests | S | \$ |
| | Other (Specify) | <u> </u> | \$ |
| | Total | 3,350,000.00 | \$ 3,350,000.00 |
| | Answer also in Appendix, Column 3, if filing under ULOE. | | |
| 2. | Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero." | Number Investors | Aggregate Dollar Amount of Purchases |
| | Accredited Investors | | \$ 3,350,000.00 |
| | Non-accredited Investors | | \$ |
| | Total (for filings under Rule 504 only) | | \$ 3,500,000.00 |
| | Answer also in Appendix, Column 4, if filing under ULOE. | | |
| 3. | If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C — Question 1. | | |
| | | Type of | Dollar Amount |
| | Type of Offering | Security | Sold |
| | Rule 505 | | s |
| | Regulation A | | \$ |
| | Rule 504 | | \$ |
| | Total | | \$_0.00 |
| 4 | a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the insurer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate. | | |
| | Transfer Agent's Fees | | s |
| | Printing and Engraving Costs | | \$ |
| | Legal Fees | | \$ |
| | Accounting Fees | | \$ |
| | Engineering Fees | | \$ |
| | Sales Commissions (specify finders' fees separately) | | \$ |
| | Other Expenses (identify) Commitment Fee | | \$_33,500.00 |
| | Total | _ | \$ 33,500.00 |

| | C. OFFERING PRICE, NU | MBER OF INVESTORS, EXPENSE | ES AND USE OF PR | OCEEDS | |
|-----|--|--|--------------------|--|--|
| | b. Enter the difference between the aggregate off and total expenses furnished in response to Part C-proceeds to the issuer." | Question 4.a. This difference is t | he "adjusted gross | | \$3,316,500.00 |
| 5. | Indicate below the amount of the adjusted gross peach of the purposes shown. If the amount for a check the box to the left of the estimate. The total proceeds to the issuer set forth in response to Pa | any purpose is not known, furnis! of the payments listed must equal t | h an estimate and | | |
| | | | | Payments to Officers, Directors, & Affiliates | Payments to Others |
| | Salaries and fees | *************************************** | |] S | . 🗆 S |
| | Purchase of real estate | ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,, | |] \$ | . 🗆 s |
| | Purchase, rental or leasing and installation of m and equipment | achinery | |] \$ | s |
| | Construction or leasing of plant buildings and fa | acilities | |] \$ | . 🗆 \$ |
| | Acquisition of other businesses (including the v offering that may be used in exchange for the as issuer pursuant to a merger) | ssets or securities of another | |] \$ | s |
| | Repayment of indebtedness | | |] \$ | s |
| | Working capital | | |] \$ | . 🗆 \$ |
| | Other (specify): Refinance of exisiting debt fo | r purchase of real estate | |] \$ | \$ 3,316,500.00 |
| | | | |] \$ | . []\$ |
| | Column Totals | | | | |
| | Total Payments Listed (column totals added) | | | $\Box s_{\underline{3}}$ | 316,500.00 |
| Г | | D. FEDERAL SIGNATURI | E | - | |
| sig | issuer has duly caused this notice to be signed by t ature constitutes an undertaking by the issuer to f information furnished by the issuer to any non-a | furnish to the U.S. Securities and I | Exchange Commiss | ion, upon writte | ale 505, the following on request of its staff, |
| Iss | er (Print or Type) | Signature | D | ate | |
| | ACO PROPERTIES, INC. | Xull. | <u> </u> | 2-4-07 | |
| Na | ne of Signer (Print or Type) | Tide of Signer (Print or Type |) | | |
| | : Dyer | President | | | |

- ATTENTION -

Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001.)

| | E. STATE SIGNATURE | | |
|----------|---|-----------|----------------|
| 1. | Is any party described in 17 CFR 230.262 presently subject to any of the disqualification provisions of such rule? | Yes | No X |
| | See Appendix, Column 5, for state response. | | |
| 2. | The undersigned issuer hereby undertakes to furnish to any state administrator of any state in which this notice is find (17 CFR 239.500) at such times as required by state law. | iled a no | tice on Form |
| 3. | The undersigned issuer hereby undertakes to furnish to the state administrators, upon written request, informatissuer to offerees. | ion furr | ished by the |
| 4. | The undersigned issuer represents that the issuer is familiar with the conditions that must be satisfied to be entimited Offering Exemption (ULOE) of the state in which this notice is filed and understands that the issuer claim of this exemption has the burden of establishing that these conditions have been satisfied. | | |
| | uer has read this notification and knows the contents to be true and has duly caused this notice to be signed on its beha thorized person. | lf by the | undersigned |
| Issuer (| Print or Type) Signature Date | | |
| WACO | PROPERTIES, INC. 12-4-07 | | |

Title (Profit or Type)

President

Instruction.

Name (Print or Type)

Jack Dyer

Print the name and title of the signing representative under his signature for the state portion of this form. One copy of every notice on Form D must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

| , | APPENDIX | | | | | | | | | | |
|-------|--------------------------------|--|--|--------------------------------------|--------------|--|----------|--|----------------------------------|--|--|
| 1 | Intend to non-a investor | to sell ccredited s in State | Type of security and aggregate offering price offered in state (Part C-Item 1) | | amount pur | investor and rchased in State C-Item 2) | | 5 Disqualification under State ULOE (if yes, attach explanation of waiver granted) (Part E-Item 1) | | | |
| State | Yes | No | | Number of Accredited Investors | Amount | Number of Non-Accredited Investors | Amount | Yes | No | | |
| AL | | | | | | | | | | | |
| AK | | | | | | | | | | | |
| AZ | | | | | | | | | | | |
| AR | | | | - | | | | | | | |
| CA | Canada and Andrew | | | | | | | | | | |
| СО | | | | - | | | | | | | |
| СТ | | | | | | | | | | | |
| DE | | | | | | · · · · · · · · · · · · · · · · · · · | | | | | |
| DC | | magnama de de de la compansa de la c | | | | | | | | | |
| FL | | × | | 1 | \$3,350,000. | | | | | | |
| GA | | | | | | | | | | | |
| ні | | Speciment Fa. Abbitomicam com V va Me | | | | | | | | | |
| ID | | | | | | | <u>.</u> | | 3 - AND LOCATION TO A RES. L. 1. | | |
| IL | | | | | | | | | | | |
| IN | | | | | | | | W M | | | |
| IA | | anne reservato ve ha Mairie Pillar | | | | | | | | | |
| KS | | | | | | | | | | | |
| KY | | | | | | | | | [<u></u> | | |
| LA | | | | | | | | | | | |
| ME | | | | - | | | | | | | |
| MD | | | | | | | | | | | |
| MA | | | | | | | | | | | |
| MI | | | | | | | | | | | |
| MN | | | | | | | | | | | |
| MS | | | | | | | | | | | |

APPENDIX 2 3 1 Disqualification under State ULOE Type of security Intend to sell and aggregate (if yes, attach Type of investor and explanation of offering price to non-accredited amount purchased in State waiver granted) investors in State offered in state (Part C-Item 2) (Part E-Item 1) (Part B-Item 1) (Part C-Item 1) Number of Number of Non-Accredited Accredited Investors Investors Amount Yes No State Yes No Amount MO MT NE NV NH NJ NM NY NC ND OH OK OR PA RI SCSD TN TX UT VT VAWA wv WI

. . .

| 1.3 | | | | APP | ENDIX | | | | |
|-------|----------------------|---|--|--------------------------------------|--|--|--------|-------------|---|
| 1 | | 2 | 3 | | · · · · · · · · · · · · · · · · · · · | 4 | | 5 Disqua | i lification |
| | to non-a investor | I to sell accredited as in State 3-Item 1) | Type of security and aggregate offering price offered in state (Part C-Item 1) | | Type of investor and amount purchased in State (Part C-Item 2) | | | | ate ULOE, attach attion of granted) -Item 1) |
| State | Yes | No | | Number of Accredited Investors | Amount | Number of Non-Accredited Investors | Amount | Yes | No |
| WY | | | | | | | | | |
| PR | | | | | | | | | |

1. . .

